ase 2:0	5 SENDER: COMPLETE THIS SECTION MENT 6	COMPLETE THIS SECTION ON DELIVERY	
	■ Complete items 1, 2, and 3. Also complete	A Signature	
	item 4 if Restricted Delivery is desired. Print your name and address on the reverse	Agent Agent	
	so that we can return the card to you.	B Received by (Printed Name) C. Date of Delivery	
	Attach this card to the back of the mailpiece, or on the front if space permits.	Losasohmson 6/20/6	
	Article Addressed to:	D. Is delivery address different from item 1? Yes	
		If YES, enter delivery address below: No	
	Deputy Warden Frank Albright		
	Tutwiler Prison for Women		
	8966 U.S. Highway 231 North		
	Wetumpka, Alabama 36092	3. Service Type Certified Mail Express Mail	
		☐ Certified Mail ☐ Express Mail ☐ Registered ☐ Return Receipt for Merchandise	
	25.20	☐ Insured Mail ☐ C.O.D.	
	05cv578	4. Restricted Delivery? (Extra Fee) ☐ Yes	
	2. Article Number 7005	1160 0001 3017 2617	
	PS Form 3811, August 2001 Domestic Ret	turn Receipt 102595-02-M-1540	
	SENDED, COMPLETE THE COMPLETE T		
	SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY	
	 Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. 	A. Signature	
	Print your name and address on the reverse	Agent Addressee	
*	so that we can return the card to you. Attach this card to the back of the mailpiece,	B. Received by (Printed Name) C. Date of Delivery	
	or on the front if space permits.	ADATIZODINSON O 10/10/2	
	Article Addressed to:	D. Is delivery address different from item 1? Yes If YES, enter delivery address below: No	
	Warden Gladys Deese		
	Tutwiler Prison for Women		
	8966 U.S. Highway 231 North/		
	Wetumpka, Alabama 36092	3. Service Type	
		Gertified Mail Express Mall Registered Recurr Receipt for Merchandise	
	1150,500	☐ Registered ☐ Return Receipt for Merchandise ☐ Insured Mail ☐ C.O.D.	
	<i>U </i>	4. Restricted Delivery? (Extra Fee)	
	2. Article Number 7005	1160 0001 3013 5600	
	PS Form 3811, August 2001 Domestic Retr	urn Receipt 103505.02 M: 1540	
		urn Heceipt 102595-02-M-1540	
		Ì	
	SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY	
	■ Complete items 1, 2, and 3. Also complete	A-Signature	
	item 4 if Restricted Delivery is desired.	X Agent	
	Print your name and address on the reverse so that we can return the card to you.	Addressee	
	Attach this card to the back of the mailpiece, or on the front if space permits.	B-Regeived by (Brinted Name) C. Date of Delivery	
	Article Addressed to:	D. Is delivery address different from item 1? Yes	
		If YES, enter delivery address below: ☐ No	
	Lt. Lenita Hawthorne		
	Tutwiler Prison for Women		
	8966 U.S. Highway 231 North		
	Wetumpka, Alabama 36092	3. Service Type	
		Certified Mail	
	05	☐ Insured Mail ☐ C.O.D.	
	UDC1578	4. Restricted Delivery? (Extra Fee)	
	2. Article Number 700.	5 1160 0001 3017 2624	
	(Transfer from service label)		